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SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

	OMB Number:	3235-0076
	Expires:	May 31, 2005
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	hours per respo	

SEC USE ONLY										
Prefix	Serial									
DATE RECEIV	ED									
1 1										

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Limited Partnership Interests in November Ventures Limited Partnership
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE
Type of Filing: New Filing Amendment
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)
November Ventures Limited Partnership
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
c/o The Davis Companies, One Appleton St., Boston, MA 02116 617-451-1300
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Telephone Number (Including Area Code)
Brief Description of Business Acquire, own, sell and otherwise deal with 100% of the membership
interest in DIV Branford LLC, a Delaware limited liability company.
Type of Business Organization
corporation limited partnership, already formed other (please specify): business trust limited partnership, to be formed
Month Year
Actual or Estimated Date of Incorporation or Organization: 12 93 X Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:
CN for Canada; FN for other foreign jurisdiction)
GENERAL INSTRUCTIONS
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.
Filing Fee: There is no federal filing fee.
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.
ATTENTION
Fallure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9

A BASICIDENTAPICATION DATE Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) TDC Ventures Corp. Business or Residence Address (Number and Street, City, State, Zip Code) c/o The Davis Companies, One Appleton Street, Boston, MA 02116 Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Davis, Jonathan G. Business or Residence Address (Number and Street, City, State, Zip Code) c/o The Davis Companies, One Appleton Street, Boston, MA 02116 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Marcus, Paul R. Business or Residence Address (Number and Street, City, State, Zip Code) c/o The Davis Companies, One Appleton Street, Boston, MA 02116 Check Box(es) that Apply: General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Executive Officer Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

		95.	77.4	.e. :080	NIORMAI	ION AROL	TOTTE	0.67		1744		
											Yes	No
1. Has t	the issuer so	ld, or does t							•	••••••	·· 🔃	
					n Appendix		-					
2. What	t is the mini	mum investi	nent that v	vill be acce	epted from	any individ	Jual?	**********	·····	•••••	\$ <u>625</u>	5.00_
3 Dogo	the offering	r narmit inir	it animarch	in of a sinc	rla unit?						Yes	No
											-	П
comr If a p or sta	the informations the information of single in the interest of the information of the information of the information of the interest of the information	nilar remune sted is an as ame of the l	eration for s sociated pe proker or d	solicitatior erson or ag ealer. If m	of purchas ent of a brol ore than fiv	ers in conn ker or deale e (5) perso	ection with or registere ns to be list	sales of se d with the S ted are asso	curities in SEC and/or	the offering with a star	g. te	
Full Name	e (Last name	first, if ind	ividual)									
Business	or Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)		_ 				
Name of A	Associated B	roker or De	aler			<u></u>						
States in \	Which Perso	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Che	k "All State	s" or check	individua	States)	• • • • • • • • • • • • • • • • • • • •	•••••	•••••		·······	•••••••	. 🗌 Al	Il States
AL	AK	AZ	ĀR	[CA]	CO	CT	[DE]	DC	FL	GA	HI	ID
	IN	[A]	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NI	NM	NY	NC	ND	OH	OK	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Name	(Last name	first, if ind	ividual)									
Business	or Residence	e Address (Number an	d Street, C	City, State,	Zip Code)						
Name of A	Associated B	roker or De	aler				 					
States in V	Vhich Person	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Chec	k "All State	s" or check	individual	States)					**************		. 🗆 Al	1 States
AL	[AK]	AZ	AR	CA	CO	CT	DE)	DC)	[FL]	GA)	(HI)	
IL MT	NE NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Name	(Last name	first, if ind	ividual)					· 	- ,			
											·	
Business	or Residence	Adaress (I	Number an	a Street, C	ity, State, I	Lip Code)						
Name of A	ssociated B	roker or De	aler								· · · · · · · · · · · · · · · · · · ·	
States in V	Vhich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Chec	k "All State	s" or check	individual	States)							☐ All	l States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
(IL)	[N]	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK)	OR	PA
RI	(SC)	SD	TN	TX	UT	∇T	VA	WA	WV	WI	$\overline{\mathbf{WY}}$	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregat Offering Pr		Amount Airealy Sold
	Debt	\$		\$
	Equity	\$		\$
	Common Preferred			
	Convertible Securities (including warrants)	\$		\$
	Partnership Interests	\$		\$
	Other (Specify LP Interests	5,100,0	000	\$5,100,000
	Total			
	Answer also in Appendix, Column 3, if filing under ULOE.	*******		* <u></u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Agraegata
		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	58		\$4,858,699.50
	Non-accredited Investors	9		$\underline{$241,300.51}$
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			,
		Type of		Dollar Amount
	Type of Offering	Security		Sold
•	Rule 505			\$
	Regulation A			\$
	Rule 504	·		\$
	Total			\$
ļ	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			\$
	Printing and Engraving Costs	.,	<u> </u>	\$ 1,000
	Legal Fees	•••••	X	\$ 60,000
	Accounting Fees		X	\$ 1,000
	Engineering Fees		X	\$ 35,000
•	Sales Commissions (specify finders' fees separately)			\$
	Other Expenses (identify) Loan Fees, Title Fees & Filing Fees		K]	\$ 97,605
	Total			¢194 605

b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."		3	\$4,905,395.00
Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	ny purpose is not known, furnish an estimate and If the payments listed must equal the adjusted gross	!	
		Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees			. 🗆 \$
Purchase of real estate (Net of Mortgat	ge Assumption)	□ \$	X \$4,102,993.00
Purchase, rental or leasing and installation of mac	chinery		
and equipment		_	
Construction or leasing of plant buildings and fac		□ \$	\$
Acquisition of other businesses (including the val offering that may be used in exchange for the asso issuer pursuant to a merger)	ets or securities of another	- ¢	П¢
Repayment of indebtedness			-
Working capital			
Other (specify): Lender Reserves			
(op. 0.7)			V + ULUILLOUS
		\$	 \$
Column Totals		⊐\$	X \$4,905,395.00
Total Payments Listed (column totals added)		K \$4.	905,395.00
	DEFERMANCIATURE		
ne issuer has duly caused this notice to be signed by the gnature constitutes an undertaking by the issuer to fur e information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Commis	sion, upon writte	
suer (Print or Type) November Ventures Limited Partnership		Date 1/5/0	5
ame of Signer (Print or Type)	Title of Signer (Print or Type)		_
Paul R. Marcus	Treasurer of the General Par	tner of the	e Issuer
		. •	

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

1.		62 présently subject to any of the disqualification	Yes	No X
		See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertake. D (17 CFR 239.500) at such times as rec	s to furnish to any state administrator of any state in which this notice is f quired by state law.	iled a ňo	tice on Form
. 3.	The undersigned issuer hereby undertaken issuer to offerees.	es to furnish to the state administrators, upon written request, informat	ion furn	ished by the
4 .	limited Offering Exemption (ULOE) of the	he issuer is familiar with the conditions that must be satisfied to be ent he state in which this notice is filed and understands that the issuer clair blishing that these conditions have been satisfied.		
	ruer has read this notification and knows the c uthorized person.	contents to be true and has duly caused this notice to be signed on its behal	f by the	undersigned
Nove	(Print or Type) ember Ventures ited Partnership	Signature Date 5/0	5	
Vame ((Print or Type)	Title (Printyr Type)		
au1	R. Marcus	Treasurer of the General Partner of the	Issu	er

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form. D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1	İ	2	3			4		ı	5
	1	d to sell	Type of security and aggregate offering price		Disqualification under State ULOE (if yes, attach explanation of				
	1	s in State	offered in state		amount pu	f investor and urchased in State		waiver	granted)
	(Part B	I-Item 1)	(Part C-Item 1)		(Part	C-Item 2)		(Part E	-Item 1)
State	Yes	No	LP Interest in November Ventures Limited Partnership	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ	X		\$5,100,000	0	\$0	1	\$30,000		X
AR									
CA		X	\$5,100,000	4.	\$130,022.45	0	so		Х
CO	X		\$5,100,000	0	\$0	1	\$627.81		X
CT		X	\$5,100,000	6	\$270,000	0	\$0		X
DE									
DC				 					
FL			<u>.</u>	·					
GA				<u> </u>					
ні							•		
ID									
IL			,						
IN									
IA									
KS									
KY									
LA									
ME									
MD									·
MA	X		\$5,100,000	39	3,218,899.	30 2	\$35,044.89	ļ	Х
MI									
MN									
MS									
			<u> </u>		L		L	L	

APPENDIS

1		2	3			4	,		5 elification
	to non-a	I to sell accredited is in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	·	Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes No		LP Interest in November Ventures Limited Partnership	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
MT	X		\$5,100,000	0	\$0	2	\$25,000		x
NE									
NV		X	\$5,100,000	1	\$250,000	0	\$0		X
NH									
NJ		X	\$5,100,000	1	\$50,000	0	\$0		X
NM									
NY		X	\$5,100,000	2	\$304,777.6	5 0	\$0		X
NC									
ND									
ОН			·	<u></u>					
ОК				 					
OR		<u> </u>							
PA		X	\$5,100,000	2	\$85,000	0	\$0		X
RI		X	\$5,100,000	1	\$50,000		े\$0		X
SC									
SD									
TN									
TX		X	\$5,100,000	2	\$450,000	0	\$0		X
UT						 		· · · · · · · · · · · · · · · · · · ·	
VT									
VA	X		\$5,100,000	0	\$0	1	\$627.81		X
WA									
WV					· ·				
WI									

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1	2		3	. 4				5	
	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	LP Interest in November Ventures Limited Partnership	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	Ν̈́ο
WY							÷		
PR									